## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT # P00000108812

1. Entity Name FIRST ATLANTIC CORPORATION

Massa and

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Principal Place of Susiness ONE NORTH CLEMATIS ST

SUITE 200

WEST PALM BEACH, FL 33401 US

Mailing Address

ONE NORTH CLEMATIS ST

SUITE 200

WEST PALM BEACH, FL 33401

HS

### FILED Apr 22, 2004 08:00 AM Secretary of State



02262004

No Cha-P

CR2E034 (10/03)

4. FEI Number 65-1078146 Applied For Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TABERNILLA, ARMANDO A ESQ. ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401

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the obligations of reg		alpose or aritinging its regions of allies or re	gioto de agont, or bo	
SIGNATURESignature, ty	ped or printed name of registered agent and title	d applicable. (NOTE, Registered Agent signature	required when remstating)	DATE
	III FEE IS \$150.00 004 Fee will be \$550.00	9. Election Campaign Financing  Trust Fund Contribution.	\$5.00 May Be Added to Fees	000000124941 04/22/04-80065-007 150.00
10.	OFFICERS AND DIRECTORS			

and antity or having this statement for the purpose of changing its registered affire or registered agent or both in the State of Ployida, I am familiar with and accept

#### DP\$ TITLE CEPERO, GUSTAVO R NAME ONE NORTH CLEMATIS ST SUITE 200 STREET ADDRESS WEST PALM BEACH, FL 33401 CSTY - ST - Z3P DVT THEF BLOMQVIST, ERIK J NAME STREET ADDRESS ONE NORTH CLEMATIS ST SUITE 200 WEST PALM BEACH, FL 33401 CITY-ST-ZIP 7133.E NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like emplowered.

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Erik J. Blomqvist, Vice President 561-655-6303

Daylime Phone #